

UNITED STATES DISTRICT COURT

for the

Western District of Virginia

Lynchburg, Virginia Division

Nicole Lawtome-Bowles

Case No.

6:24 CV 00048

(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Liberty University Online et.al
 Liberty University School of Health Sciences et.al.
 Dr. Brendan Haynie
 Dr. Heidi DiFrancesca

Jury Trial: (check one) Yes No
 CLERK'S OFFICE U.S. DISTRICT COURT
 AT LYNCHBURG, VA
 FILED

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

 SEP 25 2024
 LAURA AUSTIN CLERK
 BY: 
 DEPUTY CLERK

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

Nicole Lawtome-Bowles

(b) County of Residence of First Listed Plaintiff USA
(EXCEPT IN U.S. PLAINTIFF CASES)(c) Attorneys (Firm Name, Address, and Telephone Number)
ProSe**DEFENDANTS**

Liberty University Online School of Health Sciences et.al.

County of Residence of First Listed Defendant USA

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- | | |
|--|--|
| <input type="checkbox"/> 1 U.S. Government Plaintiff | <input type="checkbox"/> 3 Federal Question (U.S. Government Not a Party) |
| <input type="checkbox"/> 2 U.S. Government Defendant | <input type="checkbox"/> 4 Diversity (Indicate Citizenship of Parties in Item III) |

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

	PTF	DEF		PTF	DEF
Citizen of This State	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Citizen of Another State	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6

IV. NATURE OF SUIT (Place an "X" in One Box Only)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 Insurance	PERSONAL INJURY	PERSONAL INJURY	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881	<input type="checkbox"/> 375 False Claims Act
<input type="checkbox"/> 120 Marine	<input type="checkbox"/> 310 Airplane	<input type="checkbox"/> 365 Personal Injury - Product Liability	<input type="checkbox"/> 422 Appeal 28 USC 158	<input type="checkbox"/> 376 Qui Tam (31 USC 3729(a))
<input type="checkbox"/> 130 Miller Act	<input type="checkbox"/> 315 Airplane Product Liability	<input type="checkbox"/> 367 Health Care/ Pharmaceutical Personal Injury Product Liability	<input type="checkbox"/> 423 Withdrawal 28 USC 157	<input type="checkbox"/> 400 State Reapportionment
<input type="checkbox"/> 140 Negotiable Instrument	<input type="checkbox"/> 320 Assault, Libel & Slander	<input type="checkbox"/> 330 Federal Employers' Liability	INTELLECTUAL PROPERTY RIGHTS	<input type="checkbox"/> 410 Antitrust
<input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment	<input type="checkbox"/> 340 Marine	<input type="checkbox"/> 345 Marine Product Liability	<input type="checkbox"/> 820 Copyrights	<input type="checkbox"/> 430 Banks and Banking
<input type="checkbox"/> 151 Medicare Act	<input type="checkbox"/> 350 Motor Vehicle	<input type="checkbox"/> 370 Other Fraud	<input type="checkbox"/> 830 Patent	<input type="checkbox"/> 450 Commerce
<input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans)	<input type="checkbox"/> 355 Motor Vehicle Product Liability	<input type="checkbox"/> 371 Truth in Lending	<input type="checkbox"/> 835 Patent - Abbreviated New Drug Application	<input type="checkbox"/> 460 Deportation
<input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits	<input type="checkbox"/> 360 Other Personal Injury	<input type="checkbox"/> 380 Other Personal Property Damage	<input type="checkbox"/> 840 Trademark	<input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations
<input type="checkbox"/> 160 Stockholders' Suits	<input type="checkbox"/> 362 Personal Injury - Medical Malpractice	<input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 880 Defend Trade Secrets Act of 2016	<input type="checkbox"/> 480 Consumer Credit (15 USC 1681 or 1692)
<input type="checkbox"/> 190 Other Contract			SOCIAL SECURITY	<input type="checkbox"/> 485 Telephone Consumer Protection Act
<input type="checkbox"/> 195 Contract Product Liability			<input type="checkbox"/> 861 HIA (1395ff)	<input type="checkbox"/> 490 Cable/Sat TV
<input type="checkbox"/> 196 Franchise			<input type="checkbox"/> 862 Black Lung (923)	<input type="checkbox"/> 850 Securities/Commodities/ Exchange
REAL PROPERTY	CIVIL RIGHTS	PRISONER PETITIONS	<input type="checkbox"/> 863 DIWC/DIWW (405(g))	<input type="checkbox"/> 890 Other Statutory Actions
<input type="checkbox"/> 210 Land Condemnation	<input type="checkbox"/> 440 Other Civil Rights	Habeas Corpus:	<input type="checkbox"/> 864 SSID Title XVI	<input type="checkbox"/> 891 Agricultural Acts
<input type="checkbox"/> 220 Foreclosure	<input type="checkbox"/> 441 Voting	<input type="checkbox"/> 463 Alien Detainee	<input type="checkbox"/> 865 RSI (405(g))	<input type="checkbox"/> 893 Environmental Matters
<input type="checkbox"/> 230 Rent Lease & Ejectment	<input type="checkbox"/> 442 Employment	<input type="checkbox"/> 510 Motions to Vacate Sentence	FEDERAL TAX SUITS	<input type="checkbox"/> 895 Freedom of Information Act
<input type="checkbox"/> 240 Torts to Land	<input type="checkbox"/> 443 Housing/ Accommodations	<input type="checkbox"/> 530 General	<input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant)	<input type="checkbox"/> 896 Arbitration
<input type="checkbox"/> 245 Tort Product Liability	<input type="checkbox"/> 445 Amer. w/Disabilities - Employment	<input type="checkbox"/> 535 Death Penalty	<input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision
<input type="checkbox"/> 290 All Other Real Property	<input type="checkbox"/> 446 Amer. w/Disabilities - Other	Other:		<input type="checkbox"/> 950 Constitutionality of State Statutes
	<input type="checkbox"/> 448 Education	<input type="checkbox"/> 540 Mandamus & Other	<input type="checkbox"/> 462 Naturalization Application	
		<input type="checkbox"/> 550 Civil Rights	<input type="checkbox"/> 465 Other Immigration Actions	
		<input type="checkbox"/> 555 Prison Condition		
		<input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement		

V. ORIGIN (Place an "X" in One Box Only)

- | | | | | | | |
|--|---|--|---|--|--|---|
| <input type="checkbox"/> 1 Original Proceeding | <input type="checkbox"/> 2 Removed from State Court | <input type="checkbox"/> 3 Remanded from Appellate Court | <input type="checkbox"/> 4 Reinstated or Reopened | <input type="checkbox"/> 5 Transferred from Another District | <input type="checkbox"/> 6 Multidistrict Litigation - Transfer | <input type="checkbox"/> 8 Multidistrict Litigation - Direct File |
|--|---|--|---|--|--|---|

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

Americans with Disabilities Act (ADA), 42 U.S.C. § 12101 et seq. Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794.

VI. CAUSE OF ACTION

Brief description of cause:

action against Liberty University for violations of the Americans with Disabilities Act (ADA) Student Educational Equity Act (SEEA)

VII. REQUESTED IN COMPLAINT: CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$

CHECK YES only if demanded in complaint:

JURY DEMAND: Yes No**VIII. RELATED CASE(S) IF ANY**

(See instructions):

JUDGE

DOCKET NUMBER

DATE

09/25/2024

SIGNATURE OF ATTORNEY OF RECORD

Nicole Lawtome-Bowles ProSe

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

Yes

JUDGE

Moon

MAG. JUDGE

6-24 CV 00048

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Nicole Lawtome-Bowles		
Address	56 Center Street		
	Highland Falls	NY	10928
County	City	State	Zip Code
Telephone Number	(347) 538-5386		
E-Mail Address	NicoleLawtome@aol.com		

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name	Liberty University Online et.al		
Job or Title (<i>if known</i>)	PHD: Health Sciences: General		
Address	1971 University Blvd. Academic Department 800 Graves Mill Rd		
	Lynchburg	VA	24502
County	City	State	Zip Code
Telephone Number	Lynchburg, Virginia		
E-Mail Address (<i>if known</i>)	(434) 582-2000		
	luostudentadvocate@liberty.edu		
<input type="checkbox"/> Individual capacity <input type="checkbox"/> Official capacity			

Defendant No. 2

Name	Liberty University School of Health Sciences et.al.		
Job or Title (<i>if known</i>)	PHD: Health Sciences: General		
Address	1971 University Blvd.		
	Lynchburg	VA	24515
County	City	State	Zip Code
Telephone Number	Lynchburg, Virginia		
E-Mail Address (<i>if known</i>)	(434) 582-2000		
	luostudentadvocate@liberty.edu		
<input type="checkbox"/> Individual capacity <input type="checkbox"/> Official capacity			

Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

Defendant No. 3

Name	Dr. Brendan Haynie		
Job or Title (<i>if known</i>)	Associate Dean of Online Programs, School of Health Sciences		
Address	1971 University Blvd.		
	Lynchburg	VA	24515
County	Lynchburg, Virginia		
Telephone Number	(434)582-7447		
E-Mail Address (<i>if known</i>)	bhaynie@liberty.edu		

Individual capacity Official capacity

Defendant No. 4

Name	Dr. Heidi DiFrancesca		
Job or Title (<i>if known</i>)	Dean, School of Health Sciences		
Address	1971 University Blvd.		
	Lynchburg	VA	24515
County	Lynchburg, Virginia		
Telephone Number	(434)582-7447		
E-Mail Address (<i>if known</i>)	hdifrancesca@liberty.edu		

Individual capacity Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (*check all that apply*):

- Federal officials (a *Bivens* claim)
 State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials? I am filing a lawsuit under Section 1983 of the Civil Rights Act (42 U.S.C. § 1983), which allows claims for the “deprivation of any rights, privileges, or immunities secured by the Constitution and federal laws.” In this case, I am asserting that my federal rights under the Every Student Succeeds Act (ESSA) and the Americans with Disabilities Act (ADA) have been violated by Liberty University’s School of Health Sciences.

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

Dr. Heidi DiFrancesca, Dean of the School of Health Sciences, and Dr. Brendan Haynie, Associate Dean of Online Programs, School of Health Sciences, engaged in actions that deprived me of my rights under federal law.

-
- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

As the Deans of the School of Health Sciences at Liberty University, Dr. DiFrancesca's and Dr. Haynie position within the university structure gives her the authority to make decisions regarding the management of educational programs, including the implementation of policies related to student accommodations. In this capacity, they exercises authority over students, including individuals like myself seeking reasonable accommodations under federal laws such as the ADA.

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?

The events giving rise to my claims occurred at Liberty University School of Health Sciences Online Doctorate PhD Program in Plaintiff Dissertation stage, specifically through interactions with Dr. Heidi DiFrancesca, Dean of the School of Health Sciences, and Dr. Brendan Haynie, Associate Dean of Online Programs, School of Health Sciences.

- B. What date and approximate time did the events giving rise to your claim(s) occur?

The relevant events occurred between 2022 and 2023, with critical actions and decisions made during the spring and summer of 2023.

-
- C. What are the facts underlying your claim(s)? (*For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?*)

Denial of Reasonable Accommodations: In 2022, I was enrolled in a doctoral program at Liberty University's School of Health Sciences. As a student with a disability, I requested reasonable accommodations as provided under the Americans with Disabilities Act (ADA), including the use of assistive technology such as virtual meetings, use of my 2017 Apple AI computer, speech-to-text applications, and Dragon AI. Dr. Heidi DiFrancesca, in her capacity as Dean, denied my requests for these accommodations without providing a valid justification. This decision impeded my ability to complete my academic work and continue my doctoral studies. Dr. Brendan Haynie, as Associate Dean of Online Programs, upheld and enforced the denial of these accommodations, contributing to the ongoing discrimination and my inability to access the necessary tools to complete my coursework. The refusal to provide these accommodations directly violated my rights under the ADA and Section 504 of the Rehabilitation Act, which guarantee equal access to education for students with disabilities.

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

As a direct result of the actions of Dr. Heidi DiFrancesca, Dean of the School of Health Sciences, and Dr. Brendan Haynie, Associate Dean of Online Programs, the following injuries were sustained: Academic and Career Harm: I was unable to complete my doctoral program due to the denial of reasonable accommodations necessary for my disability. This has permanently impacted my educational trajectory and professional career. The decision to terminate my access to critical academic resources and my accounts has directly prevented me from completing necessary coursework and dissertation requirements, leading to the termination of my academic journey at Liberty University. Emotional and Psychological Distress: The constant denial of accommodations, combined with the racial discrimination I experienced, has caused me significant emotional distress. I have experienced feelings of exclusion, frustration, and helplessness, which have impacted my mental health. The abrupt end of my doctoral journey following the Supreme Courts affirmative action ruling, compounded by the discriminatory actions of the defendants, exacerbated my psychological suffering.

Financial Loss: The inability to complete my doctoral degree has resulted in substantial financial harm. I invested significant financial resources in the pursuit of my degree, including tuition and related costs, which have now been lost due to my inability to graduate. Additionally, my future earning potential has been drastically reduced as a result of not obtaining my doctoral degree, further contributing to my financial injury.

Professional Reputation and Opportunities: The denial of access to necessary academic tools and resources has caused irreparable damage to my professional reputation within the academic and professional community. I have lost potential opportunities for career advancement, networking, and professional growth that would have been available upon completion of my degree.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I respectfully request the following relief from the court: Completion of Degree: I request that the court order Liberty University to either: Allow me to finish my dissertation and complete my doctoral program in Health Sciences, or Confer upon me the degree of Doctor of Health Sciences PhD, as I have earned it through my academic work.

Monetary Damages:

\$5 million in compensation for the following:

Loss of my home,

Loss of my career and future earning potential,

The financial burden of student loans, which I am obligated to repay despite not being granted my degree.

The requested damages are to compensate for the severe financial and personal hardships I have endured as a result of the actions taken by Liberty University and its administrators.

2. List all Defendants. State the full name of the Defendant, even if that Defendant is a government agency, an organization, a corporation, or an individual. Include the address where each Defendant may be served. Make sure that the Defendant(s) listed below are identical to those contained in the above caption of the complaint.

a. Defendant No. 1

Name: 1. Liberty University Online School of Health Sciences et.al. 2. Dr. Mallory Nicole Ball

Address: 1971 University Blvd, Lynchburg, VA 24515

b. Defendant No. 2

Name: 3. Dr. Heidi DiFrancesca 4. Dr. Brendan Haynie

Address: 1971 University Blvd, Lynchburg, VA 24515

NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES AND ADDRESSES ON A SEPARATE SHEET OF PAPER.

Check here if additional sheets of paper are attached:

Please label the attached sheets of paper to correspond to the appropriate numbered paragraph above (e.g. Additional Defendants 2.c., 2.d., etc.).

JURISDICTION

Federal courts are courts of limited jurisdiction. Generally, two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount of damages is more than \$75,000 is a diversity of citizenship case. Federal courts also have jurisdiction over cases where the United States is a Defendant.

3. What is the basis for federal court jurisdiction?

Federal Question

Diversity of Citizenship

Government Defendant

4. If the basis for jurisdiction is Federal Question, which Federal Constitution, statutory or treaty right is at issue? List all that apply.

1. Americans with Disabilities Act (ADA): Prohibits discrimination based on disability and requires reasonable accommodations for individuals with disabilities.

2. Section 504 of the Rehabilitation Act of 1973: Prohibits discrimination based on disability in programs or activities receiving federal financial assistance.

3. Age Discrimination Act of 1975: Prohibits discrimination on the basis of age in programs receiving federal financial assistance

4. Title VI of the Civil Rights Act of 1964: Prohibits discrimination on the basis of race, color, or national origin in programs receiving federal financial assistance.

5. Title IX of the Education Amendments of 1972: Prohibits discrimination on the basis of sex in any education program or activity receiving federal financial assistance.

6. 42 U.S.C. § 1983 (Civil Rights Act): Allows individuals to sue for violations of their federal constitutional or statutory rights by persons acting under the color of state law.

7. Student Educational Equity Act (SEEAA): Protects the rights of students to receive equal educational opportunities and resources regardless of race, gender, or disability.

5. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party? Each Plaintiff must be diverse from each Defendant for diversity jurisdiction.

Plaintiff No. 1: Nicole Lawtone-Bowles

United States of America
State of Citizenship: (USA or U.S.A.),

Plaintiff No. 2: Nicole Lawtone-Bowles

United States of America

State of Citizenship: (USA or U.S.A.),

Defendant No. 1: Liberty University Online School of Health Sciences

United States of America

State of Citizenship: (USA or U.S.A.)

Defendant No. 2: Dr. Heidi DiFrancesca
Dr. Brendan Haynie

State of Citizenship: United States of America
(USA or U.S.A.),

**Attach additional sheets of paper as necessary and label this information as paragraph
5. Check here if additional sheets of paper are attached.**

STATEMENT OF THE CLAIM

Describe in the space provided below the basic facts of your claim. The description of facts should include a specific explanation of how, where, and when each of the defendants named in the caption violated the law, and how you were harmed. Do not give any legal arguments or cite cases or statutes. Each paragraph must be numbered separately, beginning with number 6. Please write each single set of circumstances in a separately numbered paragraph.

6. See Attached

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 09/20/2024

Signature of Plaintiff

Printed Name of Plaintiff

Nicole Lawtone-Bowles

B. For Attorneys

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

	<i>City</i>	<i>State</i>	<i>Zip Code</i>
Telephone Number	(347) 538-5386		
E-mail Address	NicoleLawtone@aol.com		

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF VIRGINIA
LYNCHBURG DIVISION

Nicole Lawtone-Bowles, ProSe)

Plaintiff(s),)

V.) Civil Action No.: _____
Liberty University Online School of Health Sciences)
Dr. Mallory Nicole Ball)
Dr. Heidi DiFrancesca) (To be assigned by Clerk of District Court)
Dr. Brendan Haynie)

Defendant(s).)
(Enter the full name(s) of ALL parties in this lawsuit.)
Please attach additional sheets if necessary.)

COMPLAINT

PARTIES

1. List all Plaintiffs. State the full name of the Plaintiff, address and telephone number.
Do the same for any additional Plaintiffs.

a. Plaintiff No. 1

Name: Nicole Lawtone-Bowles
Address: 56 Center Street Highland Falls, New York 10928
Telephone Number: (347) 538-5386

b. Plaintiff No. 2

Name: Nicole Lawtone-Bowles ProSe
Address: 56 Center Street Highland Falls, New York 10928
Telephone Number: (347) 538-5386

1 STATEMENT OF THE CLAIM

- 2 6. I enrolled in Liberty University's Health Sciences PhD program in January 2022 to enhance my
3 qualifications for a promotion at the City of New York Department of Homeless Services. I had previously
4 completed a Juris Master degree from Liberty University School of Law in December 2021.
- 5 7. As a student with a diagnosed disability, Obsessive-Compulsive Disorder (OCD), I submitted requests for
6 reasonable accommodations to Liberty University's Office of Disability Accommodation Support. These
7 accommodations included extended deadlines, the use of assistive technology (such as a 2017 Apple AI
8 computer and speech-to-text applications), and the ability to hold virtual meetings with instructors. Despite
9 my submission of these requests, I was denied the accommodations without any explanation.
- 10 8. During the Spring and Summer of 2022, I was enrolled in courses HSCI 725, HSCI 730, HSCI 815, and
11 HSCI 820. My instructors, including Dr. Mallory Nicole Ball, did not provide the accommodations I
12 needed to complete the coursework, which resulted in failing grades in these courses. I believe that these
13 denials were due to my disability, as well as my age, race, and gender. I am a Black woman over the age of
14 40, and I observed that younger, white male students were given more academic support and resources than
15 I was.
- 16 9. On March 5, 2022, I sent an email to various university departments, including the Registrar's Office, the
17 Office of Disability Accommodation Support, and the Online Writing Center, to express concerns about the
18 outdated citation and grading standards used by the university. After raising these concerns, I received a
19 disparaging email from an Associate Professor, and my academic performance was placed under further
20 scrutiny. Shortly afterward, my accommodations were denied, and I believe this denial was in retaliation
21 for raising these issues.
- 22 10. In June 2023, after filing formal complaints with the U.S. Department of Education's Office for Civil
23 Rights (OCR) and in federal court regarding the university's failure to provide accommodations, Liberty
24 University expelled me from the program. The expulsion was executed by Dr. Heidi DiFrancesca, Dean of
25 the School of Health Sciences, and Dr. Brendan Haynie, Associate Dean of Online Programs, without
26 giving me the opportunity for a fair hearing or to discuss the issues.

- 1 11. I have exhausted all available administrative appeals within Liberty University in an attempt to re-enroll in
2 the Health Sciences PhD program. Despite my continuous efforts, including a recent letter I wrote pleading
3 to be readmitted, Liberty University has refused to reinstate me into the program.
- 4 12. As a direct result of the expulsion and the university's refusal to readmit me, I lost my home to foreclosure.
5 Without the financial security of completing my degree and the resulting career advancement, I have been
6 left homeless and without a place to live. This financial and personal devastation occurred despite my
7 ongoing attempts to rectify the situation through administrative processes at the university.
- 8 13. The OCR began investigating my claims of retaliation under Case No. 11-23-2279 in July 2023. This
9 investigation was centered on whether Liberty University retaliated against me for asserting my rights
10 under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act. The OCR
11 found that there were sufficient grounds to investigate this claim.
- 12 14. In October 2023, I filed an additional complaint with the OCR, Case No. 11-24-2004, alleging that my
13 expulsion from Liberty University was not only in retaliation for my disability-related complaints but also
14 due to discrimination based on my age, race, and gender. This complaint was filed shortly after the
15 Supreme Court's 2023 decision regarding race-based affirmative action. The OCR referred the case to the
16 Federal Mediation and Conciliation Service (FMCS) for mediation.
- 17 15. As a result of Liberty University's actions, I have suffered significant emotional distress, financial loss, and
18 harm to my academic and professional career. In addition to the emotional and psychological toll, I have
19 lost my home and am now homeless. Furthermore, I have accumulated substantial student loan debt, which
20 I must repay despite being unable to complete my degree due to Liberty University's denial of
21 accommodations and retaliatory expulsion.

Attach additional sheets of paper as necessary and label them as Additional Facts and continue to number the paragraphs consecutively. Check here if additional sheets of paper are attached.

REQUEST FOR RELIEF

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking.

See Attached

1 **REQUEST FOR RELIEF**

2 I respectfully request the following relief from the Court:

3 1. **Reinstatement into the PhD Program:**

4 I request that Liberty University reinstate me into the Health Sciences PhD program with all necessary
5 accommodations for my disability, as initially requested and required under the Americans with Disabilities
6 Act (ADA) and Section 504 of the Rehabilitation Act. These accommodations should include extended
7 deadlines, assistive technology, and virtual meetings as appropriate for my condition.

8 2. **Conferral of Degree:**

9 In the alternative, if reinstatement is not possible, I request that the Court order Liberty University to confer
10 my PhD in Health Sciences based on the academic work I have already completed, including the
11 accommodation of any outstanding work necessary for degree conferral.

12 3. **Monetary Damages:**

13 I seek \$5 million in monetary compensation for the following:

- 14 o **Emotional Distress:** The emotional trauma, psychological harm, and distress caused by the
15 discriminatory and retaliatory actions of Liberty University, resulting in significant mental health
16 impacts.
- 17 o **Financial Loss and Student Loans:** Compensation for the financial losses I have suffered,
18 including student loans that I continue to repay despite being unjustly expelled from the program
19 and unable to complete my degree.
- 20 o **Loss of Career Opportunities:** Damages for the loss of career advancement and future earnings
21 as a result of not being able to complete my doctoral degree, which was required for a promotion
22 at my job.
- 23 o **Foreclosure and Homelessness:** Compensation for the loss of my home due to foreclosure, which
24 directly resulted from my inability to complete my degree and secure better employment. I am
25 currently homeless and without the financial security needed to regain housing.

26 4. **Injunctive Relief Against Retaliation:**

27 I request an order from the Court prohibiting Liberty University from further retaliating against me or

1 taking any adverse actions due to my assertions of rights under the ADA, Section 504 of the Rehabilitation
2 Act, and other applicable civil rights laws.

3 **5. Attorneys' Fees and Costs:**

4 Should I retain legal representation, I request that the Court award reasonable attorneys' fees and costs
5 associated with bringing this action, in accordance with federal law.

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DEMAND FOR JURY TRIAL:

YES

NO

Signed this 25 day of September, 2024.

Signature of Plaintiff No. 1 Nicole Lawton-Bowles

Signature of Plaintiff No. 2 Nicole Lawton-Bowles

**NOTE: All Plaintiffs named in the caption of the complaint must date and sign the complaint.
Attach additional sheets of paper as necessary.**

AO 440 (Rev. 06/12) (12/22 WD/VA) Summons in a Civil Action (Page 2)

Civil Action No. 4:24-cv-00048

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (*name of individual and title, if any*) **Nicole Lawtone-Bowles**
was received by me on (*date*) **09/25/2024**

- | | | | |
|--|---|--|------|
| <input checked="" type="checkbox"/> I personally served the summons on the individual at <i>(place)</i> | Liberty University Online School of Health Sciences | | |
| 1971 University Blvd, Lynchburg, VA 24515 | on <i>(date)</i> | 09/25/2024 | ; or |
| <input type="checkbox"/> I left the summons at the individual's residence or usual place of abode with <i>(name)</i> _____ | | | |
| , a person of suitable age and discretion who resides there, | | | |
| on <i>(date)</i> | 09/25/2024 | , and mailed a copy to the individual's last known address; or | |
| <input type="checkbox"/> I served the summons on <i>(name of individual)</i> _____, who is | | | |
| designated by law to accept service of process on behalf of <i>(name of organization)</i> _____ | | | |
| on <i>(date)</i> ; or | | | |
| <input type="checkbox"/> I returned the summons unexecuted because _____ ; or | | | |
| <input checked="" type="checkbox"/> Other <i>(specify):</i> _____ | | | |

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: Sept. 25, 2029

Michael Armstrong *Server's signature*

Mykael Armstrong Caregiver for Nicole Lawtome-Bowles

Printed name and title
56 Center Street Highland Falls, New York 10928
(845) 839-0220

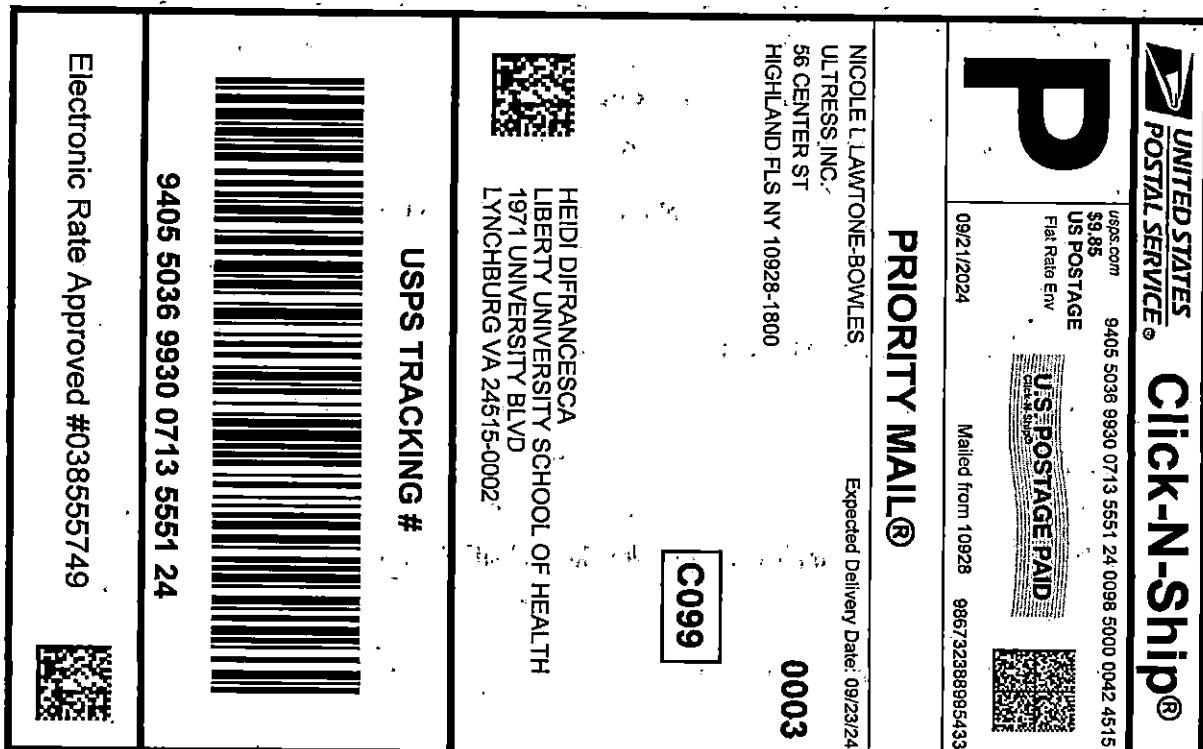
Server's address

Additional information regarding attempted service, etc:

CLERK'S OFFICE U.S. DISTRICT COURT
AT LYNCHBURG, VA
FILED

SEP 25 2024

LAURA A. AUSTIN, CLERK
Y: _____ DEPUTY CLERK



Cut on dotted line.

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2. Place your label so it does not wrap around the edge of the package.
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Ship Date:	09/21/2024		
Expected Delivery Date:	09/23/2024		

From: NICOLE L LAWTON-BOWLES
ULTRESS INC.
56 CENTER ST
HIGHLAND FLS NY 10928-1800

To: HEIDI DIFRANCESCA
LIBERTY UNIVERSITY SCHOOL OF HEALTH SCIENCES
1971 UNIVERSITY BLVD
LYNCHBURG VA 24515-0002

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